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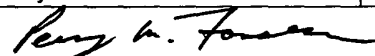
|   |                        |  |
|---|------------------------|--|
| <b>UTILITY<br/>PATENT APPLICATION<br/>TRANSMITTAL</b><br><small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small> | Attorney Docket No.    | INNOFF 3.0-024   |
|   | First Inventor         | Odd N. Oddsen Jr.  |
|   | Title                  | MOUNTING BRACKET FOR ELECTRONIC<br>DEVICE HAVING DIMENSIONAL INSERTS |
|   | Express Mail Label No. | EV342575905US  |

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|--|--|
| <b>APPLICATION ELEMENTS</b><br>See MPEP chapter 600 concerning utility patent application contents.  | <b>ADDRESS TO:</b><br>MS Patent Application<br>Commissioner for Patents<br>P.O. Box 1450<br>Alexandria, VA 22313-1450  |
| 1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17)<br><small>(Submit an original, and a duplicate for fee processing)</small>   | 7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or<br>Computer Program (Appendix)   |
| 2. <input checked="" type="checkbox"/> Applicant claims small entity status.<br>See 37 CFR 1.27.   | 8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission<br><small>(if applicable, all necessary)</small>  |
| 3. <input checked="" type="checkbox"/> Specification [Total Pages <b>25</b> ]<br><small>(preferred arrangement set forth below)</small> <ul style="list-style-type: none"><li>- Descriptive title of the invention</li><li>- Cross Reference to Related Applications</li><li>- Statement Regarding Fed sponsored R &amp; D</li><li>- Reference to sequence listing, a table,<br/>or a computer program listing appendix</li><li>- Background of the Invention</li><li>- Brief Summary of the Invention</li><li>- Brief Description of the Drawings (if filed)</li><li>- Detailed Description</li><li>- Claim(s)</li><li>- Abstract of the Disclosure</li></ul> | a. <input type="checkbox"/> Computer Readable Form (CRF)   |
| 4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets <b>5</b> ]   | b. Specification Sequence Listing on: <ul style="list-style-type: none"><li>i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or</li><li>ii. <input type="checkbox"/> Paper</li></ul> |
| 5. Oath or Declaration [Total Sheets <b>1</b> ] <ul style="list-style-type: none"><li>a. <input type="checkbox"/> Newly executed (original or copy)</li><li>b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d))<br/><small>(for continuation/divisional with Box 18 completed)</small></li><li>i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b><br/><small>Signed statement attached deleting<br/>inventor(s) named in the prior application,<br/>see 37 CFR 1.63(d)(2) and 1.33(b).</small></li></ul>  | c. <input type="checkbox"/> Statements verifying identity of above copies  |
| 6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76   | <b>ACCOMPANYING APPLICATIONS PARTS</b>   |
|  | 9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))  |
|  | 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of<br><small>(when there is an assignee) Attorney</small>   |
|  | 11. <input type="checkbox"/> English Translation Document (if applicable)  |
|  | 12. <input type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS<br>Statement (IDS/PTO-1449 Citations)   |
|  | 13. <input type="checkbox"/> Preliminary Amendment   |
|  | 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)<br><small>(Should be specifically itemized)</small>   |
|  | 15. <input type="checkbox"/> Certified Copy of Priority Document(s)<br><small>(if foreign priority is claimed)</small>   |
|  | 16. <input checked="" type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i).<br>Applicant must attach form PTO/SB/35 or its equivalent.                                |
|  | 17. <input type="checkbox"/> Other: <span style="border: 1px solid black; display: inline-block; width: 150px; height: 20px;"></span>  |

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.: \_\_\_\_\_  
Prior application information: Examiner \_\_\_\_\_ Art Unit: \_\_\_\_\_

**For CONTINUATION or DIVISIONAL APPS only:** The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

|   |  |   |          |  |  |
|---|--|---|----------|--|--|
| <b>19. CORRESPONDENCE ADDRESS</b>                                     |  |   |          |  |  |
| <input checked="" type="checkbox"/> Customer Number or Bar Code Label |  | <br>000530 |          | or <input type="checkbox"/> Correspondence address below |  |
| Name  |  |   |          |  |  |
| Address   |  |   |          |  |  |
| City  |  | State   | Zip Code |  |  |
| Country   |  | Telephone   | Fax      |  |  |
| Name (Print/Type)   |  | Perry M. Fonseca  |          | Registration No. (Attorney/Agent) 50,975                 |  |
| Signature   |  |            |          | Date July 21, 2003                                       |  |

| <b>FEE TRANSMITTAL</b><br><b>for FY 2003</b><br><small>Effective 01/01/2003, Patent fees are subject to annual revision.</small> |  | <b>Complete if Known</b> |                       |
|--|--|--------------------------|-----------------------|
| <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27  |  | Application Number       | Not Yet Assigned      |
| <b>TOTAL AMOUNT OF PAYMENT</b> (\$) <b>717.00</b>  |  | Filing Date              | Concurrently Herewith |
|  |  | First Named Inventor     | Odd N. Oddsen Jr.     |
|  |  | Examiner Name            | Not Yet Assigned      |
|  |  | Art Unit                 | Not Yet Assigned      |
|  |  | Attorney Docket No.      | INNOFF 3.0-024        |

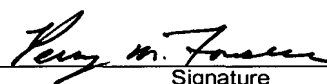
| METHOD OF PAYMENT (check all that apply)  | FEE CALCULATION (continued)  |   |              |  |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |   |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |                     |      |        |      |        |   |   |              |     |         |    |  |      |      |       |                    |     |   |   |      |       |      |        |  |  |      |       |      |     |   |  |              |       |              |     |  |          |          |          |          |          |                  |    |      |     |                        |     |  |    |      |     |                                   |     |                          |     |      |       |                                       |       |   |    |      |     |  |    |                                  |    |      |       |  |     |                                    |  |      |       |      |             |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
|---|--|---|--------------|--|-----------------|-----------------|----------|----------|----------|----------|----------|------|------|------|--------------------|-------------------------------------|------|------|------|------|-------------------|---|------|------|------|------|------------------|---------------------------|------|------|-------|------|--------------------|--|------|------|------|------|------------------------|--|---------------------|------|--------|------|--------|---|---|--------------|-----|---------|----|--|------|------|-------|--------------------|-----|---|---|------|-------|------|--------|--|--|------|-------|------|-----|---|--|--------------|-------|--------------|-----|--|----------|----------|----------|----------|----------|------------------|----|------|-----|------------------------|-----|--|----|------|-----|-----------------------------------|-----|--------------------------|-----|------|-------|---------------------------------------|-------|---|----|------|-----|--|----|----------------------------------|----|------|-------|--|-----|------------------------------------|--|------|-------|------|-------------|--------------------------------|--|------|-----|------|-----|------------------|--|------|-----|------|-----|-----------------|--|------|-----|------|-----|-------------------------------|--|------|----|------|----|-------------------------------------|--|------|-----|------|-----|---|--|------|----|------|----|--|--|------|-----|------|-----|---|--|------|-----|------|-----|---|--|------|-----|------|-----|---|--|------|-----|------|-----|---|--|
| <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None<br><input checked="" type="checkbox"/> Deposit Account<br>Deposit Account Number: <span style="border: 1px solid black; padding: 2px 20px;">12-1095</span><br>Deposit Account Name: <span style="border: 1px solid black; padding: 2px 50px;">Lerner, David, Littenberg, Krumholz &amp; Mentlik, LLP</span><br>The Director is hereby authorized to: (check all that apply)<br><input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments<br><input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application<br><input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.  | <b>3. ADDITIONAL FEES</b><br><table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2" style="text-align: left; border-bottom: 1px solid black;">Large Entity</th> <th colspan="2" style="text-align: left; border-bottom: 1px solid black;">Small Entity</th> <th rowspan="2" style="text-align: left; border-bottom: 1px solid black;">Fee Description</th> <th rowspan="2" style="text-align: left; border-bottom: 1px solid black;">Fee Paid</th> </tr> <tr> <th style="text-align: left;">Fee Code</th> <th style="text-align: left;">Fee (\$)</th> <th style="text-align: left;">Fee Code</th> <th style="text-align: left;">Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>2051</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet.</td><td></td></tr> <tr><td>1053</td><td>130</td><td>1053</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>1812</td><td>2,520</td><td>1812</td><td>2,520</td><td>For filing a request for <i>ex parte</i> reexamination</td><td></td></tr> <tr><td>1804</td><td>920*</td><td>1804</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>1805</td><td>1,840*</td><td>1805</td><td>1,840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>1251</td><td>110</td><td>2251</td><td>55</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>1252</td><td>410</td><td>2252</td><td>205</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>1253</td><td>930</td><td>2253</td><td>465</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>1254</td><td>1,450</td><td>2254</td><td>725</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>1255</td><td>1,970</td><td>2255</td><td>985</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>1401</td><td>320</td><td>2401</td><td>160</td><td>Notice of Appeal</td><td></td></tr> <tr><td>1402</td><td>320</td><td>2402</td><td>160</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>1403</td><td>280</td><td>2403</td><td>140</td><td>Request for oral hearing</td><td></td></tr> <tr><td>1451</td><td>1,510</td><td>1451</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td></td></tr> <tr><td>1452</td><td>110</td><td>2452</td><td>55</td><td>Petition to revive - unavoidable</td><td></td></tr> <tr><td>1453</td><td>1,300</td><td>2453</td><td>650</td><td>Petition to revive - unintentional</td><td></td></tr> <tr><td>1501</td><td>1,300</td><td>2501</td><td>650</td><td>Utility issue fee (or reissue)</td><td></td></tr> <tr><td>1502</td><td>470</td><td>2502</td><td>235</td><td>Design issue fee</td><td></td></tr> <tr><td>1503</td><td>630</td><td>2503</td><td>315</td><td>Plant issue fee</td><td></td></tr> <tr><td>1460</td><td>130</td><td>1460</td><td>130</td><td>Petitions to the Commissioner</td><td></td></tr> <tr><td>1807</td><td>50</td><td>1807</td><td>50</td><td>Processing fee under 37 CFR 1.17(q)</td><td></td></tr> <tr><td>1806</td><td>180</td><td>1806</td><td>180</td><td>Submission of Information Disclosure Stmt</td><td></td></tr> <tr><td>8021</td><td>40</td><td>8021</td><td>40</td><td>Recording each patent assignment per property (times number of properties)</td><td></td></tr> <tr><td>1809</td><td>750</td><td>2809</td><td>375</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td></td></tr> <tr><td>1810</td><td>750</td><td>2810</td><td>375</td><td>For each additional invention to be examined (37CFR 1.129(b))</td><td></td></tr> <tr><td>1801</td><td>750</td><td>2801</td><td>375</td><td>Request for Continued Examination (RCE)</td><td></td></tr> <tr><td>1802</td><td>900</td><td>1802</td><td>900</td><td>Request for expedited examination of a design application</td><td></td></tr> </tbody> </table> | Large Entity  |              | Small Entity   |                 | Fee Description | Fee Paid | Fee Code | Fee (\$) | Fee Code | Fee (\$) | 1051 | 130  | 2051 | 65                 | Surcharge - late filing fee or oath |      | 1052 | 50   | 2052 | 25                | Surcharge - late provisional filing fee or cover sheet. |      | 1053 | 130  | 1053 | 130              | Non-English specification |      | 1812 | 2,520 | 1812 | 2,520              | For filing a request for <i>ex parte</i> reexamination |      | 1804 | 920* | 1804 | 920*                   | Requesting publication of SIR prior to Examiner action |                     | 1805 | 1,840* | 1805 | 1,840* | Requesting publication of SIR after Examiner action |   | 1251         | 110 | 2251    | 55 | Extension for reply within first month |      | 1252 | 410   | 2252               | 205 | Extension for reply within second month |   | 1253 | 930   | 2253 | 465    | Extension for reply within third month |  | 1254 | 1,450 | 2254 | 725 | Extension for reply within fourth month |  | 1255         | 1,970 | 2255         | 985 | Extension for reply within fifth month |          | 1401     | 320      | 2401     | 160      | Notice of Appeal |    | 1402 | 320 | 2402                   | 160 | Filing a brief in support of an appeal |    | 1403 | 280 | 2403                              | 140 | Request for oral hearing |     | 1451 | 1,510 | 1451                                  | 1,510 | Petition to institute a public use proceeding |    | 1452 | 110 | 2452   | 55 | Petition to revive - unavoidable |    | 1453 | 1,300 | 2453   | 650 | Petition to revive - unintentional |  | 1501 | 1,300 | 2501 | 650         | Utility issue fee (or reissue) |  | 1502 | 470 | 2502 | 235 | Design issue fee |  | 1503 | 630 | 2503 | 315 | Plant issue fee |  | 1460 | 130 | 1460 | 130 | Petitions to the Commissioner |  | 1807 | 50 | 1807 | 50 | Processing fee under 37 CFR 1.17(q) |  | 1806 | 180 | 1806 | 180 | Submission of Information Disclosure Stmt |  | 8021 | 40 | 8021 | 40 | Recording each patent assignment per property (times number of properties) |  | 1809 | 750 | 2809 | 375 | Filing a submission after final rejection (37 CFR 1.129(a)) |  | 1810 | 750 | 2810 | 375 | For each additional invention to be examined (37CFR 1.129(b)) |  | 1801 | 750 | 2801 | 375 | Request for Continued Examination (RCE) |  | 1802 | 900 | 1802 | 900 | Request for expedited examination of a design application |  |
| Large Entity  |  | Small Entity  |              | Fee Description  | Fee Paid        |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |   |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |                     |      |        |      |        |   |   |              |     |         |    |  |      |      |       |                    |     |   |   |      |       |      |        |  |  |      |       |      |     |   |  |              |       |              |     |  |          |          |          |          |          |                  |    |      |     |                        |     |  |    |      |     |                                   |     |                          |     |      |       |                                       |       |   |    |      |     |  |    |                                  |    |      |       |  |     |                                    |  |      |       |      |             |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Fee Code  | Fee (\$)   | Fee Code  | Fee (\$)     |  |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |   |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |                     |      |        |      |        |   |   |              |     |         |    |  |      |      |       |                    |     |   |   |      |       |      |        |  |  |      |       |      |     |   |  |              |       |              |     |  |          |          |          |          |          |                  |    |      |     |                        |     |  |    |      |     |                                   |     |                          |     |      |       |                                       |       |   |    |      |     |  |    |                                  |    |      |       |  |     |                                    |  |      |       |      |             |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1051  | 130  | 2051  | 65           | Surcharge - late filing fee or oath  |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |   |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |                     |      |        |      |        |   |   |              |     |         |    |  |      |      |       |                    |     |   |   |      |       |      |        |  |  |      |       |      |     |   |  |              |       |              |     |  |          |          |          |          |          |                  |    |      |     |                        |     |  |    |      |     |                                   |     |                          |     |      |       |                                       |       |   |    |      |     |  |    |                                  |    |      |       |  |     |                                    |  |      |       |      |             |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1052  | 50   | 2052  | 25           | Surcharge - late provisional filing fee or cover sheet.                    |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |   |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |                     |      |        |      |        |   |   |              |     |         |    |  |      |      |       |                    |     |   |   |      |       |      |        |  |  |      |       |      |     |   |  |              |       |              |     |  |          |          |          |          |          |                  |    |      |     |                        |     |  |    |      |     |                                   |     |                          |     |      |       |                                       |       |   |    |      |     |  |    |                                  |    |      |       |  |     |                                    |  |      |       |      |             |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1053  | 130  | 1053  | 130          | Non-English specification  |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |   |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |                     |      |        |      |        |   |   |              |     |         |    |  |      |      |       |                    |     |   |   |      |       |      |        |  |  |      |       |      |     |   |  |              |       |              |     |  |          |          |          |          |          |                  |    |      |     |                        |     |  |    |      |     |                                   |     |                          |     |      |       |                                       |       |   |    |      |     |  |    |                                  |    |      |       |  |     |                                    |  |      |       |      |             |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1812  | 2,520  | 1812  | 2,520        | For filing a request for <i>ex parte</i> reexamination                     |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |   |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |                     |      |        |      |        |   |   |              |     |         |    |  |      |      |       |                    |     |   |   |      |       |      |        |  |  |      |       |      |     |   |  |              |       |              |     |  |          |          |          |          |          |                  |    |      |     |                        |     |  |    |      |     |                                   |     |                          |     |      |       |                                       |       |   |    |      |     |  |    |                                  |    |      |       |  |     |                                    |  |      |       |      |             |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1804  | 920*   | 1804  | 920*         | Requesting publication of SIR prior to Examiner action                     |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |   |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |                     |      |        |      |        |   |   |              |     |         |    |  |      |      |       |                    |     |   |   |      |       |      |        |  |  |      |       |      |     |   |  |              |       |              |     |  |          |          |          |          |          |                  |    |      |     |                        |     |  |    |      |     |                                   |     |                          |     |      |       |                                       |       |   |    |      |     |  |    |                                  |    |      |       |  |     |                                    |  |      |       |      |             |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1805  | 1,840*   | 1805  | 1,840*       | Requesting publication of SIR after Examiner action                        |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |   |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |                     |      |        |      |        |   |   |              |     |         |    |  |      |      |       |                    |     |   |   |      |       |      |        |  |  |      |       |      |     |   |  |              |       |              |     |  |          |          |          |          |          |                  |    |      |     |                        |     |  |    |      |     |                                   |     |                          |     |      |       |                                       |       |   |    |      |     |  |    |                                  |    |      |       |  |     |                                    |  |      |       |      |             |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1251  | 110  | 2251  | 55           | Extension for reply within first month                                     |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |   |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |                     |      |        |      |        |   |   |              |     |         |    |  |      |      |       |                    |     |   |   |      |       |      |        |  |  |      |       |      |     |   |  |              |       |              |     |  |          |          |          |          |          |                  |    |      |     |                        |     |  |    |      |     |                                   |     |                          |     |      |       |                                       |       |   |    |      |     |  |    |                                  |    |      |       |  |     |                                    |  |      |       |      |             |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1252  | 410  | 2252  | 205          | Extension for reply within second month                                    |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |   |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |                     |      |        |      |        |   |   |              |     |         |    |  |      |      |       |                    |     |   |   |      |       |      |        |  |  |      |       |      |     |   |  |              |       |              |     |  |          |          |          |          |          |                  |    |      |     |                        |     |  |    |      |     |                                   |     |                          |     |      |       |                                       |       |   |    |      |     |  |    |                                  |    |      |       |  |     |                                    |  |      |       |      |             |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1253  | 930  | 2253  | 465          | Extension for reply within third month                                     |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |   |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |                     |      |        |      |        |   |   |              |     |         |    |  |      |      |       |                    |     |   |   |      |       |      |        |  |  |      |       |      |     |   |  |              |       |              |     |  |          |          |          |          |          |                  |    |      |     |                        |     |  |    |      |     |                                   |     |                          |     |      |       |                                       |       |   |    |      |     |  |    |                                  |    |      |       |  |     |                                    |  |      |       |      |             |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1254  | 1,450  | 2254  | 725          | Extension for reply within fourth month                                    |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |   |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |                     |      |        |      |        |   |   |              |     |         |    |  |      |      |       |                    |     |   |   |      |       |      |        |  |  |      |       |      |     |   |  |              |       |              |     |  |          |          |          |          |          |                  |    |      |     |                        |     |  |    |      |     |                                   |     |                          |     |      |       |                                       |       |   |    |      |     |  |    |                                  |    |      |       |  |     |                                    |  |      |       |      |             |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1255  | 1,970  | 2255  | 985          | Extension for reply within fifth month                                     |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |   |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |                     |      |        |      |        |   |   |              |     |         |    |  |      |      |       |                    |     |   |   |      |       |      |        |  |  |      |       |      |     |   |  |              |       |              |     |  |          |          |          |          |          |                  |    |      |     |                        |     |  |    |      |     |                                   |     |                          |     |      |       |                                       |       |   |    |      |     |  |    |                                  |    |      |       |  |     |                                    |  |      |       |      |             |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1401  | 320  | 2401  | 160          | Notice of Appeal   |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |   |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |                     |      |        |      |        |   |   |              |     |         |    |  |      |      |       |                    |     |   |   |      |       |      |        |  |  |      |       |      |     |   |  |              |       |              |     |  |          |          |          |          |          |                  |    |      |     |                        |     |  |    |      |     |                                   |     |                          |     |      |       |                                       |       |   |    |      |     |  |    |                                  |    |      |       |  |     |                                    |  |      |       |      |             |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1402  | 320  | 2402  | 160          | Filing a brief in support of an appeal                                     |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |   |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |                     |      |        |      |        |   |   |              |     |         |    |  |      |      |       |                    |     |   |   |      |       |      |        |  |  |      |       |      |     |   |  |              |       |              |     |  |          |          |          |          |          |                  |    |      |     |                        |     |  |    |      |     |                                   |     |                          |     |      |       |                                       |       |   |    |      |     |  |    |                                  |    |      |       |  |     |                                    |  |      |       |      |             |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1403  | 280  | 2403  | 140          | Request for oral hearing   |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |   |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |                     |      |        |      |        |   |   |              |     |         |    |  |      |      |       |                    |     |   |   |      |       |      |        |  |  |      |       |      |     |   |  |              |       |              |     |  |          |          |          |          |          |                  |    |      |     |                        |     |  |    |      |     |                                   |     |                          |     |      |       |                                       |       |   |    |      |     |  |    |                                  |    |      |       |  |     |                                    |  |      |       |      |             |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1451  | 1,510  | 1451  | 1,510        | Petition to institute a public use proceeding                              |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |   |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |                     |      |        |      |        |   |   |              |     |         |    |  |      |      |       |                    |     |   |   |      |       |      |        |  |  |      |       |      |     |   |  |              |       |              |     |  |          |          |          |          |          |                  |    |      |     |                        |     |  |    |      |     |                                   |     |                          |     |      |       |                                       |       |   |    |      |     |  |    |                                  |    |      |       |  |     |                                    |  |      |       |      |             |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1452  | 110  | 2452  | 55           | Petition to revive - unavoidable   |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |   |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |                     |      |        |      |        |   |   |              |     |         |    |  |      |      |       |                    |     |   |   |      |       |      |        |  |  |      |       |      |     |   |  |              |       |              |     |  |          |          |          |          |          |                  |    |      |     |                        |     |  |    |      |     |                                   |     |                          |     |      |       |                                       |       |   |    |      |     |  |    |                                  |    |      |       |  |     |                                    |  |      |       |      |             |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1453  | 1,300  | 2453  | 650          | Petition to revive - unintentional   |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |   |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |                     |      |        |      |        |   |   |              |     |         |    |  |      |      |       |                    |     |   |   |      |       |      |        |  |  |      |       |      |     |   |  |              |       |              |     |  |          |          |          |          |          |                  |    |      |     |                        |     |  |    |      |     |                                   |     |                          |     |      |       |                                       |       |   |    |      |     |  |    |                                  |    |      |       |  |     |                                    |  |      |       |      |             |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1501  | 1,300  | 2501  | 650          | Utility issue fee (or reissue)   |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |   |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |                     |      |        |      |        |   |   |              |     |         |    |  |      |      |       |                    |     |   |   |      |       |      |        |  |  |      |       |      |     |   |  |              |       |              |     |  |          |          |          |          |          |                  |    |      |     |                        |     |  |    |      |     |                                   |     |                          |     |      |       |                                       |       |   |    |      |     |  |    |                                  |    |      |       |  |     |                                    |  |      |       |      |             |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1502  | 470  | 2502  | 235          | Design issue fee   |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |   |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |                     |      |        |      |        |   |   |              |     |         |    |  |      |      |       |                    |     |   |   |      |       |      |        |  |  |      |       |      |     |   |  |              |       |              |     |  |          |          |          |          |          |                  |    |      |     |                        |     |  |    |      |     |                                   |     |                          |     |      |       |                                       |       |   |    |      |     |  |    |                                  |    |      |       |  |     |                                    |  |      |       |      |             |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1503  | 630  | 2503  | 315          | Plant issue fee  |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |   |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |                     |      |        |      |        |   |   |              |     |         |    |  |      |      |       |                    |     |   |   |      |       |      |        |  |  |      |       |      |     |   |  |              |       |              |     |  |          |          |          |          |          |                  |    |      |     |                        |     |  |    |      |     |                                   |     |                          |     |      |       |                                       |       |   |    |      |     |  |    |                                  |    |      |       |  |     |                                    |  |      |       |      |             |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1460  | 130  | 1460  | 130          | Petitions to the Commissioner  |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |   |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |                     |      |        |      |        |   |   |              |     |         |    |  |      |      |       |                    |     |   |   |      |       |      |        |  |  |      |       |      |     |   |  |              |       |              |     |  |          |          |          |          |          |                  |    |      |     |                        |     |  |    |      |     |                                   |     |                          |     |      |       |                                       |       |   |    |      |     |  |    |                                  |    |      |       |  |     |                                    |  |      |       |      |             |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1807  | 50   | 1807  | 50           | Processing fee under 37 CFR 1.17(q)  |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |   |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |                     |      |        |      |        |   |   |              |     |         |    |  |      |      |       |                    |     |   |   |      |       |      |        |  |  |      |       |      |     |   |  |              |       |              |     |  |          |          |          |          |          |                  |    |      |     |                        |     |  |    |      |     |                                   |     |                          |     |      |       |                                       |       |   |    |      |     |  |    |                                  |    |      |       |  |     |                                    |  |      |       |      |             |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1806  | 180  | 1806  | 180          | Submission of Information Disclosure Stmt                                  |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |   |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |                     |      |        |      |        |   |   |              |     |         |    |  |      |      |       |                    |     |   |   |      |       |      |        |  |  |      |       |      |     |   |  |              |       |              |     |  |          |          |          |          |          |                  |    |      |     |                        |     |  |    |      |     |                                   |     |                          |     |      |       |                                       |       |   |    |      |     |  |    |                                  |    |      |       |  |     |                                    |  |      |       |      |             |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 8021  | 40   | 8021  | 40           | Recording each patent assignment per property (times number of properties) |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |   |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |                     |      |        |      |        |   |   |              |     |         |    |  |      |      |       |                    |     |   |   |      |       |      |        |  |  |      |       |      |     |   |  |              |       |              |     |  |          |          |          |          |          |                  |    |      |     |                        |     |  |    |      |     |                                   |     |                          |     |      |       |                                       |       |   |    |      |     |  |    |                                  |    |      |       |  |     |                                    |  |      |       |      |             |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1809  | 750  | 2809  | 375          | Filing a submission after final rejection (37 CFR 1.129(a))                |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |   |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |                     |      |        |      |        |   |   |              |     |         |    |  |      |      |       |                    |     |   |   |      |       |      |        |  |  |      |       |      |     |   |  |              |       |              |     |  |          |          |          |          |          |                  |    |      |     |                        |     |  |    |      |     |                                   |     |                          |     |      |       |                                       |       |   |    |      |     |  |    |                                  |    |      |       |  |     |                                    |  |      |       |      |             |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1810  | 750  | 2810  | 375          | For each additional invention to be examined (37CFR 1.129(b))              |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |   |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |                     |      |        |      |        |   |   |              |     |         |    |  |      |      |       |                    |     |   |   |      |       |      |        |  |  |      |       |      |     |   |  |              |       |              |     |  |          |          |          |          |          |                  |    |      |     |                        |     |  |    |      |     |                                   |     |                          |     |      |       |                                       |       |   |    |      |     |  |    |                                  |    |      |       |  |     |                                    |  |      |       |      |             |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1801  | 750  | 2801  | 375          | Request for Continued Examination (RCE)                                    |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |   |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |                     |      |        |      |        |   |   |              |     |         |    |  |      |      |       |                    |     |   |   |      |       |      |        |  |  |      |       |      |     |   |  |              |       |              |     |  |          |          |          |          |          |                  |    |      |     |                        |     |  |    |      |     |                                   |     |                          |     |      |       |                                       |       |   |    |      |     |  |    |                                  |    |      |       |  |     |                                    |  |      |       |      |             |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1802  | 900  | 1802  | 900          | Request for expedited examination of a design application                  |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |   |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |                     |      |        |      |        |   |   |              |     |         |    |  |      |      |       |                    |     |   |   |      |       |      |        |  |  |      |       |      |     |   |  |              |       |              |     |  |          |          |          |          |          |                  |    |      |     |                        |     |  |    |      |     |                                   |     |                          |     |      |       |                                       |       |   |    |      |     |  |    |                                  |    |      |       |  |     |                                    |  |      |       |      |             |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| <b>1. BASIC FILING FEE</b><br><table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2" style="text-align: left; border-bottom: 1px solid black;">Large Entity</th> <th colspan="2" style="text-align: left; border-bottom: 1px solid black;">Small Entity</th> <th rowspan="2" style="text-align: left; border-bottom: 1px solid black;">Fee Description</th> <th rowspan="2" style="text-align: left; border-bottom: 1px solid black;">Fee Paid</th> </tr> <tr> <th style="text-align: left;">Fee Code</th> <th style="text-align: left;">Fee (\$)</th> <th style="text-align: left;">Fee Code</th> <th style="text-align: left;">Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1001</td><td>750</td><td>2001</td><td>375</td><td>Utility filing fee</td><td style="border: 1px solid black; text-align: right;">375.00</td></tr> <tr><td>1002</td><td>330</td><td>2002</td><td>165</td><td>Design filing fee</td><td style="border: 1px solid black; text-align: right;"></td></tr> <tr><td>1003</td><td>520</td><td>2003</td><td>260</td><td>Plant filing fee</td><td style="border: 1px solid black; text-align: right;"></td></tr> <tr><td>1004</td><td>750</td><td>2004</td><td>375</td><td>Reissue filing fee</td><td style="border: 1px solid black; text-align: right;"></td></tr> <tr><td>1005</td><td>160</td><td>2005</td><td>80</td><td>Provisional filing fee</td><td style="border: 1px solid black; text-align: right;"></td></tr> <tr> <td colspan="5" style="text-align: right;"><b>SUBTOTAL (1)</b></td> <td style="border: 1px solid black; text-align: right;">(\$) 375.00</td> </tr> </tbody> </table> | Large Entity   |   | Small Entity |  | Fee Description | Fee Paid        | Fee Code | Fee (\$) | Fee Code | Fee (\$) | 1001     | 750  | 2001 | 375  | Utility filing fee | 375.00                              | 1002 | 330  | 2002 | 165  | Design filing fee |   | 1003 | 520  | 2003 | 260  | Plant filing fee |                           | 1004 | 750  | 2004  | 375  | Reissue filing fee |  | 1005 | 160  | 2005 | 80   | Provisional filing fee |  | <b>SUBTOTAL (1)</b> |      |        |      |        | (\$) 375.00   | <b>2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE</b><br><table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">Total Claims</td> <td style="width: 10%; border: 1px solid black; text-align: center;">30</td> <td style="width: 10%;">-20** =</td> <td style="width: 10%; border: 1px solid black; text-align: center;">10</td> <td style="width: 10%;">x</td> <td style="width: 10%; border: 1px solid black; text-align: center;">9.00</td> <td style="width: 10%;">=</td> <td style="width: 10%; border: 1px solid black; text-align: right;">90.00</td> </tr> <tr> <td>Independent Claims</td> <td style="border: 1px solid black; text-align: center;">9</td> <td>-3** =</td> <td style="border: 1px solid black; text-align: center;">6</td> <td>x</td> <td style="border: 1px solid black; text-align: center;">42.00</td> <td>=</td> <td style="border: 1px solid black; text-align: right;">252.00</td> </tr> <tr> <td>Multiple Dependent</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td style="border: 1px solid black; text-align: right;"></td> </tr> </table><br><table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2" style="text-align: left; border-bottom: 1px solid black;">Large Entity</th> <th colspan="2" style="text-align: left; border-bottom: 1px solid black;">Small Entity</th> <th rowspan="2" style="text-align: left; border-bottom: 1px solid black;">Fee Description</th> <th rowspan="2" style="text-align: left; border-bottom: 1px solid black;">Fee Paid</th> </tr> <tr> <th style="text-align: left;">Fee Code</th> <th style="text-align: left;">Fee (\$)</th> <th style="text-align: left;">Fee Code</th> <th style="text-align: left;">Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1202</td><td>18</td><td>2202</td><td>9</td><td>Claims in excess of 20</td><td></td></tr> <tr><td>1201</td><td>84</td><td>2201</td><td>42</td><td>Independent claims in excess of 3</td><td></td></tr> <tr><td>1203</td><td>280</td><td>2203</td><td>140</td><td>Multiple dependent claim, if not paid</td><td></td></tr> <tr><td>1204</td><td>84</td><td>2204</td><td>42</td><td>** Reissue independent claims over original patent</td><td></td></tr> <tr><td>1205</td><td>18</td><td>2205</td><td>9</td><td>** Reissue claims in excess of 20 and over original patent</td><td></td></tr> <tr> <td colspan="5" style="text-align: right;"><b>SUBTOTAL (2)</b></td> <td style="border: 1px solid black; text-align: right;">(\$) 342.00</td> </tr> </tbody> </table> <p style="font-size: small;">**or number previously paid, if greater; For Reissues, see above</p> | Total Claims | 30  | -20** = | 10 | x                                      | 9.00 | =    | 90.00 | Independent Claims | 9   | -3** =                                  | 6 | x    | 42.00 | =    | 252.00 | Multiple Dependent                     |  |      |       |      |     |   |  | Large Entity |       | Small Entity |     | Fee Description                        | Fee Paid | Fee Code | Fee (\$) | Fee Code | Fee (\$) | 1202             | 18 | 2202 | 9   | Claims in excess of 20 |     | 1201                                   | 84 | 2201 | 42  | Independent claims in excess of 3 |     | 1203                     | 280 | 2203 | 140   | Multiple dependent claim, if not paid |       | 1204  | 84 | 2204 | 42  | ** Reissue independent claims over original patent |    | 1205                             | 18 | 2205 | 9     | ** Reissue claims in excess of 20 and over original patent |     | <b>SUBTOTAL (2)</b>                |  |      |       |      | (\$) 342.00 |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Large Entity  |  | Small Entity  |              | Fee Description  |                 |                 | Fee Paid |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |   |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |                     |      |        |      |        |   |   |              |     |         |    |  |      |      |       |                    |     |   |   |      |       |      |        |  |  |      |       |      |     |   |  |              |       |              |     |  |          |          |          |          |          |                  |    |      |     |                        |     |  |    |      |     |                                   |     |                          |     |      |       |                                       |       |   |    |      |     |  |    |                                  |    |      |       |  |     |                                    |  |      |       |      |             |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Fee Code  | Fee (\$)   | Fee Code  | Fee (\$)     |  |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |   |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |                     |      |        |      |        |   |   |              |     |         |    |  |      |      |       |                    |     |   |   |      |       |      |        |  |  |      |       |      |     |   |  |              |       |              |     |  |          |          |          |          |          |                  |    |      |     |                        |     |  |    |      |     |                                   |     |                          |     |      |       |                                       |       |   |    |      |     |  |    |                                  |    |      |       |  |     |                                    |  |      |       |      |             |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1001  | 750  | 2001  | 375          | Utility filing fee   | 375.00          |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |   |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |                     |      |        |      |        |   |   |              |     |         |    |  |      |      |       |                    |     |   |   |      |       |      |        |  |  |      |       |      |     |   |  |              |       |              |     |  |          |          |          |          |          |                  |    |      |     |                        |     |  |    |      |     |                                   |     |                          |     |      |       |                                       |       |   |    |      |     |  |    |                                  |    |      |       |  |     |                                    |  |      |       |      |             |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1002  | 330  | 2002  | 165          | Design filing fee  |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |   |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |                     |      |        |      |        |   |   |              |     |         |    |  |      |      |       |                    |     |   |   |      |       |      |        |  |  |      |       |      |     |   |  |              |       |              |     |  |          |          |          |          |          |                  |    |      |     |                        |     |  |    |      |     |                                   |     |                          |     |      |       |                                       |       |   |    |      |     |  |    |                                  |    |      |       |  |     |                                    |  |      |       |      |             |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1003  | 520  | 2003  | 260          | Plant filing fee   |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |   |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |                     |      |        |      |        |   |   |              |     |         |    |  |      |      |       |                    |     |   |   |      |       |      |        |  |  |      |       |      |     |   |  |              |       |              |     |  |          |          |          |          |          |                  |    |      |     |                        |     |  |    |      |     |                                   |     |                          |     |      |       |                                       |       |   |    |      |     |  |    |                                  |    |      |       |  |     |                                    |  |      |       |      |             |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1004  | 750  | 2004  | 375          | Reissue filing fee   |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |   |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |                     |      |        |      |        |   |   |              |     |         |    |  |      |      |       |                    |     |   |   |      |       |      |        |  |  |      |       |      |     |   |  |              |       |              |     |  |          |          |          |          |          |                  |    |      |     |                        |     |  |    |      |     |                                   |     |                          |     |      |       |                                       |       |   |    |      |     |  |    |                                  |    |      |       |  |     |                                    |  |      |       |      |             |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1005  | 160  | 2005  | 80           | Provisional filing fee   |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |   |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |                     |      |        |      |        |   |   |              |     |         |    |  |      |      |       |                    |     |   |   |      |       |      |        |  |  |      |       |      |     |   |  |              |       |              |     |  |          |          |          |          |          |                  |    |      |     |                        |     |  |    |      |     |                                   |     |                          |     |      |       |                                       |       |   |    |      |     |  |    |                                  |    |      |       |  |     |                                    |  |      |       |      |             |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| <b>SUBTOTAL (1)</b>   |  |   |              |  | (\$) 375.00     |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |   |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |                     |      |        |      |        |   |   |              |     |         |    |  |      |      |       |                    |     |   |   |      |       |      |        |  |  |      |       |      |     |   |  |              |       |              |     |  |          |          |          |          |          |                  |    |      |     |                        |     |  |    |      |     |                                   |     |                          |     |      |       |                                       |       |   |    |      |     |  |    |                                  |    |      |       |  |     |                                    |  |      |       |      |             |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Total Claims  | 30   | -20** =   | 10           | x  | 9.00            | =               | 90.00    |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |   |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |                     |      |        |      |        |   |   |              |     |         |    |  |      |      |       |                    |     |   |   |      |       |      |        |  |  |      |       |      |     |   |  |              |       |              |     |  |          |          |          |          |          |                  |    |      |     |                        |     |  |    |      |     |                                   |     |                          |     |      |       |                                       |       |   |    |      |     |  |    |                                  |    |      |       |  |     |                                    |  |      |       |      |             |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Independent Claims  | 9  | -3** =  | 6            | x  | 42.00           | =               | 252.00   |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |   |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |                     |      |        |      |        |   |   |              |     |         |    |  |      |      |       |                    |     |   |   |      |       |      |        |  |  |      |       |      |     |   |  |              |       |              |     |  |          |          |          |          |          |                  |    |      |     |                        |     |  |    |      |     |                                   |     |                          |     |      |       |                                       |       |   |    |      |     |  |    |                                  |    |      |       |  |     |                                    |  |      |       |      |             |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Multiple Dependent  |  |   |              |  |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |   |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |                     |      |        |      |        |   |   |              |     |         |    |  |      |      |       |                    |     |   |   |      |       |      |        |  |  |      |       |      |     |   |  |              |       |              |     |  |          |          |          |          |          |                  |    |      |     |                        |     |  |    |      |     |                                   |     |                          |     |      |       |                                       |       |   |    |      |     |  |    |                                  |    |      |       |  |     |                                    |  |      |       |      |             |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Large Entity  |  | Small Entity  |              | Fee Description  | Fee Paid        |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |   |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |                     |      |        |      |        |   |   |              |     |         |    |  |      |      |       |                    |     |   |   |      |       |      |        |  |  |      |       |      |     |   |  |              |       |              |     |  |          |          |          |          |          |                  |    |      |     |                        |     |  |    |      |     |                                   |     |                          |     |      |       |                                       |       |   |    |      |     |  |    |                                  |    |      |       |  |     |                                    |  |      |       |      |             |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Fee Code  | Fee (\$)   | Fee Code  | Fee (\$)     |  |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |   |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |                     |      |        |      |        |   |   |              |     |         |    |  |      |      |       |                    |     |   |   |      |       |      |        |  |  |      |       |      |     |   |  |              |       |              |     |  |          |          |          |          |          |                  |    |      |     |                        |     |  |    |      |     |                                   |     |                          |     |      |       |                                       |       |   |    |      |     |  |    |                                  |    |      |       |  |     |                                    |  |      |       |      |             |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1202  | 18   | 2202  | 9            | Claims in excess of 20   |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |   |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |                     |      |        |      |        |   |   |              |     |         |    |  |      |      |       |                    |     |   |   |      |       |      |        |  |  |      |       |      |     |   |  |              |       |              |     |  |          |          |          |          |          |                  |    |      |     |                        |     |  |    |      |     |                                   |     |                          |     |      |       |                                       |       |   |    |      |     |  |    |                                  |    |      |       |  |     |                                    |  |      |       |      |             |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1201  | 84   | 2201  | 42           | Independent claims in excess of 3  |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |   |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |                     |      |        |      |        |   |   |              |     |         |    |  |      |      |       |                    |     |   |   |      |       |      |        |  |  |      |       |      |     |   |  |              |       |              |     |  |          |          |          |          |          |                  |    |      |     |                        |     |  |    |      |     |                                   |     |                          |     |      |       |                                       |       |   |    |      |     |  |    |                                  |    |      |       |  |     |                                    |  |      |       |      |             |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1203  | 280  | 2203  | 140          | Multiple dependent claim, if not paid                                      |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |   |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |                     |      |        |      |        |   |   |              |     |         |    |  |      |      |       |                    |     |   |   |      |       |      |        |  |  |      |       |      |     |   |  |              |       |              |     |  |          |          |          |          |          |                  |    |      |     |                        |     |  |    |      |     |                                   |     |                          |     |      |       |                                       |       |   |    |      |     |  |    |                                  |    |      |       |  |     |                                    |  |      |       |      |             |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1204  | 84   | 2204  | 42           | ** Reissue independent claims over original patent                         |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |   |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |                     |      |        |      |        |   |   |              |     |         |    |  |      |      |       |                    |     |   |   |      |       |      |        |  |  |      |       |      |     |   |  |              |       |              |     |  |          |          |          |          |          |                  |    |      |     |                        |     |  |    |      |     |                                   |     |                          |     |      |       |                                       |       |   |    |      |     |  |    |                                  |    |      |       |  |     |                                    |  |      |       |      |             |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1205  | 18   | 2205  | 9            | ** Reissue claims in excess of 20 and over original patent                 |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |   |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |                     |      |        |      |        |   |   |              |     |         |    |  |      |      |       |                    |     |   |   |      |       |      |        |  |  |      |       |      |     |   |  |              |       |              |     |  |          |          |          |          |          |                  |    |      |     |                        |     |  |    |      |     |                                   |     |                          |     |      |       |                                       |       |   |    |      |     |  |    |                                  |    |      |       |  |     |                                    |  |      |       |      |             |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| <b>SUBTOTAL (2)</b>   |  |   |              |  | (\$) 342.00     |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |   |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |                     |      |        |      |        |   |   |              |     |         |    |  |      |      |       |                    |     |   |   |      |       |      |        |  |  |      |       |      |     |   |  |              |       |              |     |  |          |          |          |          |          |                  |    |      |     |                        |     |  |    |      |     |                                   |     |                          |     |      |       |                                       |       |   |    |      |     |  |    |                                  |    |      |       |  |     |                                    |  |      |       |      |             |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| <b>SUBMITTED BY</b><br>Name (Print/Type) <span style="border: 1px solid black; padding: 2px 50px;">Perry M. Fonseca</span><br>Signature <span style="border: 1px solid black; padding: 2px 50px;"></span>   |  | Complete (if applicable)<br>Registration No. (Attorney/Agent) <span style="border: 1px solid black; padding: 2px 20px;">50,975</span><br>Telephone <span style="border: 1px solid black; padding: 2px 20px;">(908) 518-6392</span><br>Date <span style="border: 1px solid black; padding: 2px 20px;">July 21, 2003</span> |              |  |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |   |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |                     |      |        |      |        |   |   |              |     |         |    |  |      |      |       |                    |     |   |   |      |       |      |        |  |  |      |       |      |     |   |  |              |       |              |     |  |          |          |          |          |          |                  |    |      |     |                        |     |  |    |      |     |                                   |     |                          |     |      |       |                                       |       |   |    |      |     |  |    |                                  |    |      |       |  |     |                                    |  |      |       |      |             |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |

|   |                      |  |
|---|----------------------|--|
| <b>NONPUBLICATION REQUEST<br/>UNDER<br/>35 U.S.C. 122(b)(2)(B)(i)</b> | First Named Inventor | Odd N. Oddsen Jr.  |
|   | Title                | MOUNTING BRACKET FOR ELECTRONIC DEVICE<br>HAVING DIMENSIONAL INSERTS |
|   | Attorney Docket No.  | INNOFF 3.0-024   |

I hereby certify that the invention disclosed in the attached application **has not and will not be** the subject of an application filed in another country, or under a multilateral agreement, that requires publication at eighteen months after filing.

I hereby request that the attached application not be published under 35 U.S.C. 122(b).

July 21, 2003  
Date

  
Signature

(908) 518-6392  
Telephone Number

Perry M. Fonseca  
Typed or printed name

This request must be signed in compliance with 37 CFR 1.33(b) and submitted with the application **upon filing**.

Applicant may rescind this nonpublication request at any time. If applicant rescinds a request that an application not be published under 35 U.S.C. 122(b), the application will be scheduled for publication at eighteen months from the earliest claimed filing date for which a benefit is claimed.

If applicant subsequently files an application directed to the invention disclosed in the attached application in another country, or under a multilateral international agreement, that requires publication of applications eighteen months after filing, the applicant **must** notify the United States Patent and Trademark Office of such filing within forty-five (45) days after the date of the filing of such foreign or international application. **Failure to do so will result in abandonment of this application (35 U.S.C. 122(b)(2)(B)(iii)).**

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